



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)



CONFIRMATION NO. 3367

Bib Data Sheet

|                             |                                       |              |                        |                                   |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|
| SERIAL NUMBER<br>10/797,905 | FILING DATE<br>03/09/2004<br><br>RULE | CLASS<br>363 | GROUP ART UNIT<br>2838 | ATTORNEY DOCKET NO.<br>130209.499 |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|

## APPLICANTS

Anil Tuladhar, Dearborn Heights, MI;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/469,073 05/07/2003  
 and claims benefit of 60/470,543 05/09/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/26/2004

| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR COUNTRY | SHEETS    | TOTAL CLAIMS | INDEPENDENT CLAIMS |
|---------------------------------|--|------------------|-----------|--------------|--------------------|
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | MI               | DRAWING 6 | 30           | 3                  |

## ADDRESS

00500  
 SEED INTELLECTUAL PROPERTY LAW GROUP PLLC  
 701 FIFTH AVE  
 SUITE 6300  
 SEATTLE , WA  
 98104-7092

## TITLE

Method for determining RMS values for grid-linked converters

|                                |   |   |
|--------------------------------|---|---|
| FILING FEE<br>RECEIVED<br>1080 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|--------------------------------|---|---|